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Bib Data Sheet

CONFIRMATION NO. 4023

<b>SERIAL NUMBER</b> 09/930,796	<b>FILING OR 371(c) DATE</b> 08/16/2001 <b>RULE</b>	<b>CLASS</b> 604	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> POSSIS
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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a DIV of 09/417,395 10/13/1999 PAT 6,676,627  
which is a CIP of 08/349,665 12/05/1994 PAT 6,558,366  
which is a DIV of 08/006,076 01/15/1993 PAT 5,370,609  
which is a CON of 07/563,313 08/06/1990 ABN

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 09/05/2001

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 26	<b>TOTAL CLAIMS</b> 26	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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**TITLE**

THROMBECTOMY CATHETER AND SYSTEM

**FILING FEE  
RECEIVED**  
504

FEES: Authority has been given in Paper  
No. \_\_\_\_\_ to charge/credit DEPOSIT ACCOUNT  
No. \_\_\_\_\_ for following:

<input type="checkbox"/> All Fees
<input type="checkbox"/> 1.16 Fees ( Filing )
<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
<input type="checkbox"/> 1.18 Fees ( Issue )

☐ Other \_\_\_\_\_

☐ Credit